

Supplemental Application Data Sheet

Application Information

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| Application Type:: | National Stage |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | A DEFIBRILLATOR DEVICE WITH A REMOTE REGION ON ITS CASING |
| Attorney Docket Number:: | 3003-1130-1 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | 2 |
| Small Entity?:: | No <u>Yes</u> |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent | No |
| Appl.?:: | |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GREAT BRITAIN
Status:: Full Capacity
Given Name:: KEVIN
Middle Name:: J.
Family Name:: HERBERT
Name Suffix::
City of Residence:: GLOUCESTERSHIRE
State or Province of Residence::
Country of Residence:: GREAT BRITAIN
Street of Mailing IXA MEDICAL PRODUCTS LIMITED LIABILITY
Address:: PARTNERSHIP, DEZAC HOUSE, MOTPELLIER
STREET, CHELTENHAM
City of Mailing Address:: GLOUCESTERSHIRE
State or Province of Mailing Address::
Country of Mailing Address:: GREAT BRITAIN
Postal or Zip Code of Mailing Address:: GL50 1SS

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GREAT BRITAIN
Status:: Full Capacity
Given Name:: DESMOND BRYAN
Middle Name::
Family Name:: MILLS
Name Suffix::
City of Residence:: GLOUCESTERSHIRE
State or Province of Residence::
Country of Residence:: GREAT BRITAIN
Street of Mailing IXA MEDICAL PRODUCTS LIMITED LIABILITY
Address:: PARTNERSHIP, DEZAC HOUSE, MOTPELLIER
STREET, CHELTENHAM
City of Mailing Address:: GLOUCESTERSHIRE

State or Province of Mailing Address::

Country of Mailing Address:: GREAT BRITAIN

Postal or Zip Code of Mailing Address:: GL50 1SS

Correspondence Information

Correspondence Customer Number:: 00466



Representative Information

| | |
|----------------------------------|-------|
| Representative Customer Number:: | 00466 |
|----------------------------------|-------|

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|-------------------|--|----------------------|----------------------|
| This application | National Stage of | PCT/GB2005/000248 | 1/24/05 |
| PCT/GB2005/000248 | An application claiming benefit under 35 USC 119 (e) | 60/539,335 | 1/28/04 |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|---------------|----------------------|---------------|--------------------|
| GREAT BRITAIN | 0401455.1 | 1/23/04 | Yes |
| | | | |

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::